ORIGINAL

PTO/SB/22 (08-03)
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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) Docket Number (Optional) 5048P1C1D1										
In re Application of Brian R. Dixon, et al.										
									10/23/2001	
					For Substituted 2-Arylimino Heterocycles					
					Art Unit 1624				s C. McKenzie	
	is a request cation.	under the	proviši	ons of 37 CFF	R 1.136(a) to extend the period	d for				
The requested extension and appropriate non-small-entity fee are as follows (check time period desired):										
	☐ On	e month (37 CFR	1.17(a)(1))					s	
	☐ Tw	o months	(37 CFI	R 1.17(a)(2))					s	
	X Thi	ree month	s (37 C	FR 1.17(a)(3))	·				s <u>950.00</u>	
	☐ Fo	ur months	(37 CF	R 1.17(a)(4))					s	
	☐ fiv	e months	(37 CFI	R 1.17(a)(5))					s	
	Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$									
	A check in the amount of the fee is enclosed.									
	Payment by credit card. Form PTO-2038 is attached.									
	The Director has already been authorized to charge fees in this application to a Deposit Account.									
K]	— True District to the standard to about one which may be required as credit a									
2	to Deposit Account Number 13-3372									
	I have enclosed a duplicate copy of this sheet.									
	I am the	☐ ap	plican	/inventor.						
	assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).									
		X at	torney	or agent of r	ecord. Registration Number	ər	31.0	18		
		at	tomey Registi	or agent und ation number if	ler 37 CFR 1.34(a). acting under 37 CFR 1.34(a)			_·		
	WARN on this	WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.								
		12 M	arch 2	004		λ	ilean F.	gra	-	
			Date			-	Signa	ture		
(203) 812-2712 William F. Gray Telephone Number Typed or printed name										
	E: Signatures of ture is required,	all the inven			of the entire interest or their represen	tative(s) are required. S	iubmit ma	ittiple forms if more than one	
X	Total of		1		rms are submitted.					
USPTC Including on the a) to process) an ng gathering, pro amount of time	application. eparing, and you require to U.S. Decarts	Confident submitting complet ment of Coner for P	tiality is governed g the completed a e this form and/or ommerce, P.O. Bo atents, P.O. Box	he information is required to obtain or by 35 U.S.C. 122 and 37 CFR 1.14. pplication form to the USPTO. Time or suggestions for reducing this burden, ox 1450, Alexandria, VA 22313-1450. 1450, Alexandria, VA 22313-1450.	ines c will var shoul DON	y depending upo d be sent to the (IOT SEND FEES	n the indi Chief Info	vidual case. Any comments	
CERTIF below, 1 VA 223	FICATION OF MA with the United St 113-1450.	ILING UNDER ates Postal Ser		.8(a): I hereby certifully united to the certiful of the certi	completing the form, call 1-800-PTO- y that this correspondence and any papers first class mail in an envelope addressed to Signature of Person Certifying:		i la es ei)achad ara	haida daa	osiled, on the date shown ts, P.O. Box 1450, Alexandria,	